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Bib Data Sheet

CONFIRMATION NO. 3119

SERIAL NUMBER 10/812,840	FILING DATE 03/30/2004  RULE	CLASS 540	GROUP ART UNIT 1624	ATTORNEY DOCKET NO. U 015115-2
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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 06/08/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials <i>B.K.</i>	STATE OR COUNTRY INDIA	SHEETS DRAWING 0	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 6
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TITLE  
 C2-fluoro pyrrolo [2,1-c][1,4]benzodiazepine dimers

FILING FEE  RECEIVED 1356	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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